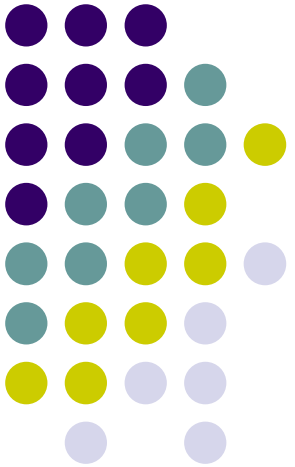
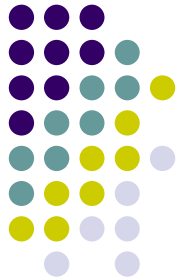
Integration of Care and Financing for Medicaid-Only and Medicare and Medicaid Eligible (MME)



RI Executive Office of Health and Human Services
Monday August 20, 2012
Oversight, Monitoring, & Continuous Improvement
Work Group Session 3

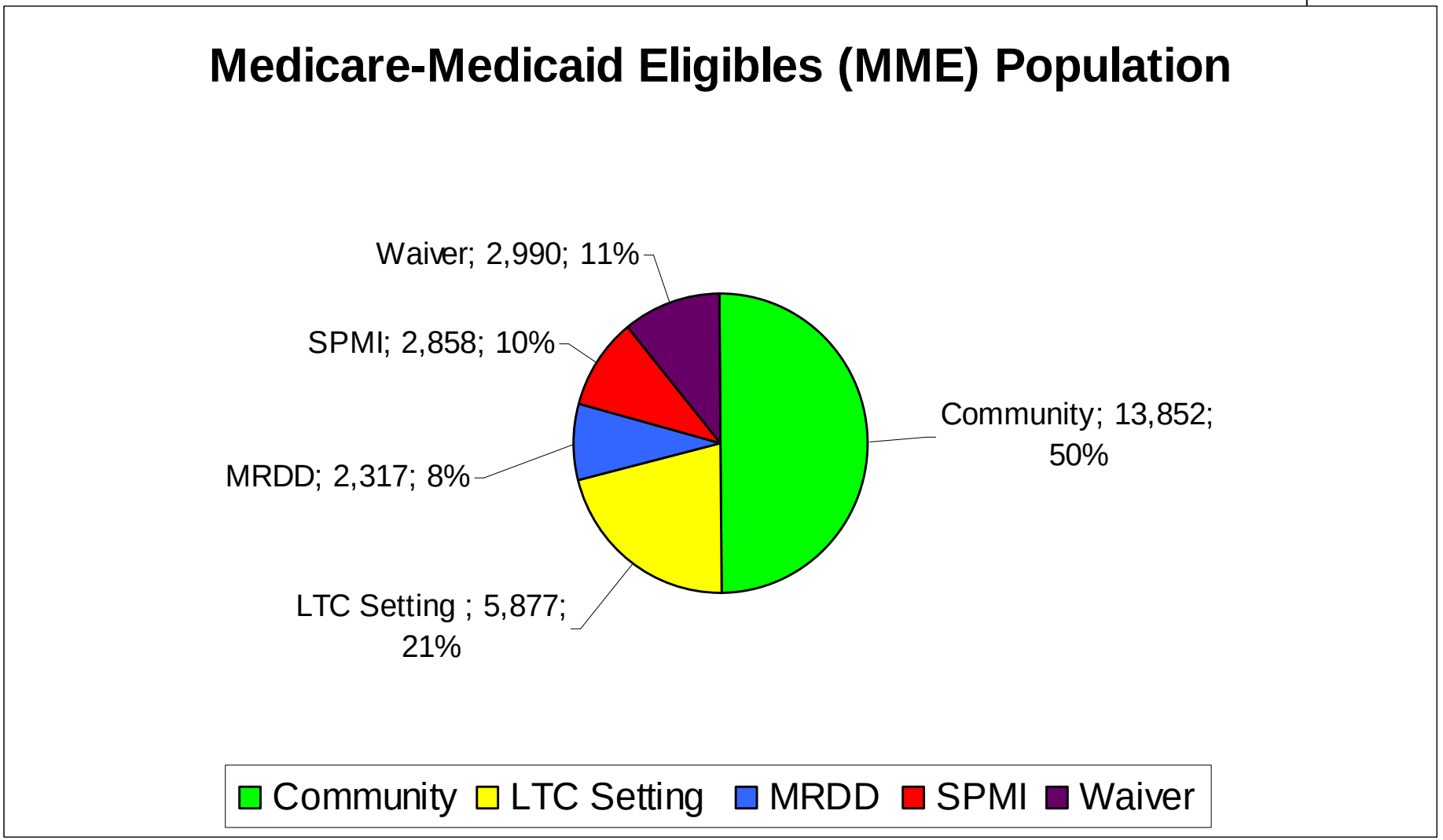
Workgroup Session 2 Recap



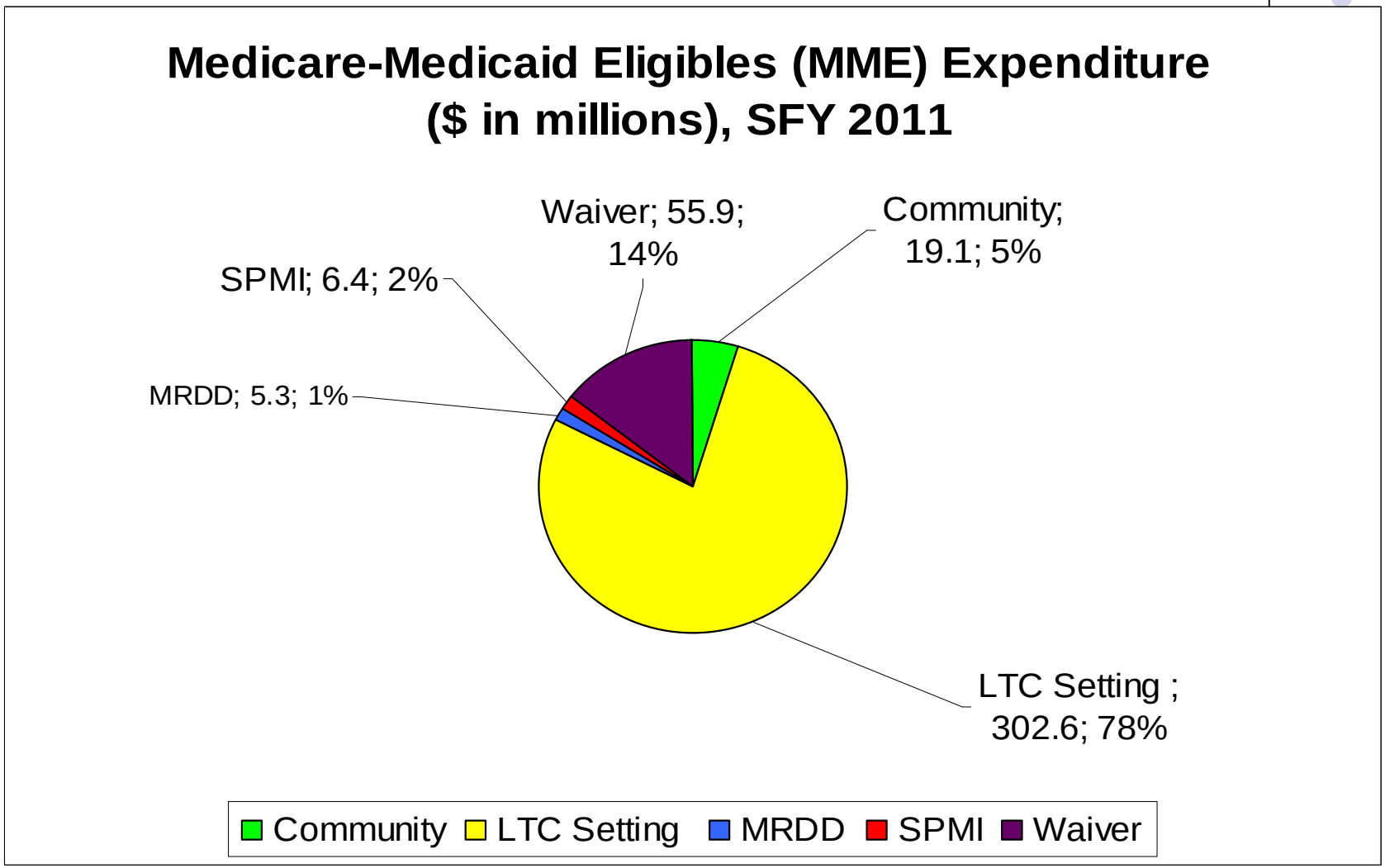
- Millie's Story - Today

Millie's Story
TODAY
• Three ID Cards: Medicare, Medicaid and Prescription Drugs
• Three different sets of Benefits/ No Coordinated Care
• Multiple Providers without structured communications/ No Patient-Centered Primary Care Home
• Uncoordinated and medically focused decisions are made by clinicians in isolation of one another
• Rules-Based Interruption of Benefit Coordination
• Limited Home Health and Community Based Services

Recap: Data Presentation

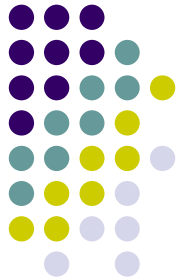


Recap: Data Presentation



*In Medicaid dollars

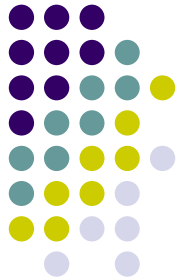
Recap: Data Presentation



- **LTC setting for >90 days is 21.1% of population but equals 77.7% of total expenditures**
- **Community population is 50.0% of population and equals only 4.9% of total expenditures**

- On average, 79% (~4,600) of Institutionally based LTC is in the Nursing Home Setting
- Most prevalent range of number of chronic conditions is 2-5 conditions (~70% in each population) in Community, LTC, and Waiver populations
- Only a small portion of the community living population moves to high level supports in a one or three year period (9.3% and 3.7% respectively)

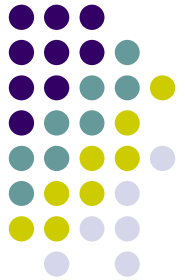
How does this data inform decisions?



- What the State seeks to purchase?
- What interventions would be most effective?

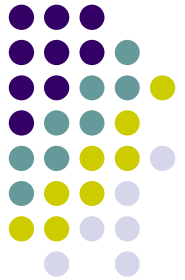
  There appear to be at least three distinct key groups – LTC, waiver, community – currently served within differing systems of care for differing types of needs
- To achieve impact/program goals - Interventions need to be effectively targeted.
- What should be Rhode Island's goals for Initiative?
  - Reduce migration from community to LTC?
  - Waiver to NH?
  - NH to community?

Last Week's Group Activity



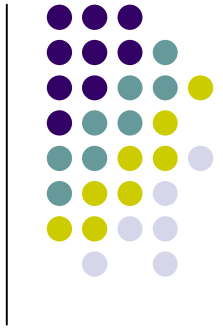
- The top five quality domains were as follows:
  - Person-Centered Care *(9 votes)*
  - Quality of Life *(9 votes)*
  - Care Management *(8 votes)*
  - Clinical Care *(8 votes)*
  - Poverty Issues *(8 votes)*

Your Additional Recommendations



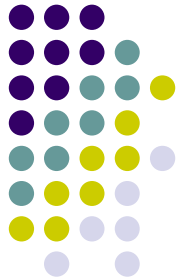
- Advanced Directives: End of Life planning
- Focus on new and promising innovative delivery models (pilot or demonstration)
- Measure and Report FFS/PCCM and MCO
- Person-centered Care – Transportation; assisted transportation
- Age Distribution – population specific measures (elder adults, younger duals)
- Address communication strategies and measures with members who are non-verbal etc.. (such as communicating with the member’s advocate/guardian)

Your Additional Recommendations



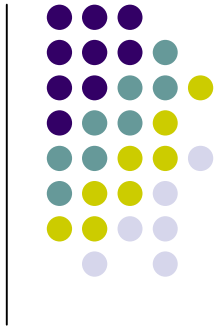
- Identify and monitor health literacy needs and provisions of cultural & linguistic services
- Social/Environmental quality measures – social isolation, employment
- Clinical Care – Individuals with disabilities relating End of Life/Hospice Care
- Clinical Care – Emergent secondary chronic conditions

The Problem?



- Inadequate person-centered care coordination
- Lack of focus on primary and preventive care
- Long Term Services and Supports/Behavioral Health coordinated separately
- Fragmentation of benefits coverage leads to confusion and inefficiencies
- Cost shifting (Hospital and Nursing Facility)

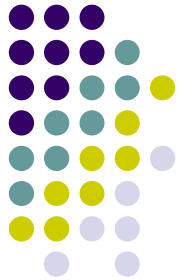
Quality Goals



- To ensure a quality strategy that:
  - measures performance,
  - is feasible to implement, and
  - based on established benchmarks and outcome measurement.

- To identify a set of overarching core measures for the following domains:
  - Utilization
  - Person-Centered Care
  - Clinical Care
  - Integration of Services (Phase II)
  - Access to Care
  - Quality of Life
  - Care Management

Things to Consider



- What are some of the issues you experience in your daily interactions with clients? professionally? personally?
- What do you view as an issue in the current system regarding specific domains? Regarding specific populations? How would issue look if improved?
- How would you know if the issue has been improved?
- How could this be monitored/evaluated?

How We Will Keep You Informed

RI Executive Office of Health and Human Services website “Integrated Care” section

All public documents will be posted to this site:

http://www.ohhs.ri.gov

Questions can be directed to this Email Address:

integratedcare@ohhs.ri.gov